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BAKER BOTTS L.L.P. 30 ROCKEFELLER PLAZA 44 TH FLOOR NEW YORK, NY 10112-4498			Certificate of Mailing or Transmission I hereby certify that this Fec(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
					J. Lynr	і Генту		(Depositor's name)
					Q.16	mn	Ferry	(Signature)
					May	3, 2008		(Date)
APPLICATION NO.	PLICATION NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO. C		D. CONFIRMATION NO.	
10/614,923 July 8, 2003		Marie-Claire Grosjean-Cournoyer		05500-00153-US		3094		
TITLE OF INVENTION	I: POLYNUCLEO IN MAGNAPOR				s in fun	GI, COMPF	using a geni	WHICH IS FUNCTIONAL
APPLN. TYPE	SMALL ENTITY	LENTITY ISSUI		PUBLICATIO	N FEE	TOTAL	FEE(S) DUE	DATE DUE
Nonprovisional	NO	\$1,44	0.00	\$300.00		\$1,740.00		May 27, 2008
EXAMINER		ART UNIT		CLASS-SUBCLASS				
Vogel, N	1636		435-00600	00				
1. Change of correspond Address" (37 CFR 1.363 X Change of corre Correspondence "Fee Address" in form PTO/SB/47 Use of a Custom	r Change of 22) attached. ss" Indication ent) attached.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME A			TED ON TH	HE PATENT (print	or type)			
	ss an assignee is identifi orth in 37 CFR 3.11. Co						s identified belov	w, the document has been filed
(A) NAME OF ASSIGN	(B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Bayer CropScience S.A.			Lyon, France					
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual X Corporation or other private group entity Government								
4a. The following fee(s) are enclosed: 4b. Payment of Fee(s):								
X Issue Fee A check in the amount of the fee(s) is enclosed.								
X Publication Fee (No small entity discount permitted) X Payment by credit card. Form PTO-2038 is attached.								
Advance Order -# of Copies X The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 03-2775 (enclose an extra copy of this form).								
5. Change in Entity Sta a. Applicant clair	tus (from status indicate ns SMALL ENTITY sta		R 1.27.	b. Applicant is	no longer	claiming SI	MALL ENTITY	status. See 37 CFR 1.27(g)(2).
The Director of the USPTO NOTE: The Issue Fee and Interest as shown by the reco	ublication Fee (if require	d) will not be a	ccepted from :					plication identified above. nt; or the assignee or other party in
Authorized Signature					- Constitution	Dat	e	May 23, 2008
Typed or printed name						Reg	istration No.	42,516